## 2022 Michigan Certificate of Need Annual Survey Cardiac Catheterization Services - PCI and CIED Procedures Report 064

									# of CIED Procedures	
								Elective		
Facility				# of Hybrid	# of Ded	Highest Level	Primary PCI	PCI	Adult CIED	Pediatric CIED
Number	Facility Name	Туре	# of Adult CCL	OR/CCL	Ped/Cong CCL**	Cardiac Cath*	Sessions	Sessions	Procedures	Procedures
50.0060	MCLAREN MACOMB	Н	3	Θ	0	тсс	81	443	198	0
50.0070	ASCENSION MACOMB OAKLAND HOSP- WARREN	Н	3	0	0	EPCI	122	831	398	Θ
50.0110	HENRY FORD HEALTH MACOMB HOSPITAL	Н	5	1	Θ	тсс	129	218	343	0
58.0030	PROMEDICA MONROE REGIONAL HOSPITAL	Н	1	0	0	EPCI	49	134	28	0
63.0014	HURON VALLEY-SINAI HOSPITAL	Н	2	0	0	EPCI	50	195	96	Θ
63.0030	BEAUMONT HOSPITAL - ROYAL OAK	Н	10	1	Θ	ТСС	158	1,608	763	Θ
63.0050	BEAUMONT HOSPITAL - FARMINGTON HILLS	Н	2	0	Θ	EPCI	37	131	113	Θ
63.0070	ASCENSION PROVIDENCE ROCHESTER HOSPITAL	Н	3	9	Θ	тсс	43	325	109	Θ
63.0120	MCLAREN OAKLAND	Н	1	Θ	0	PPCI	0	0	0	0
63.0130	ASCENSION PROVIDENCE HOSPITAL	Н	6	9	0	тсс	21	497	284	Θ
63.0140	TRINITY HEALTH OAKLAND HOSPITAL	Н	5	1	0	тсс	76	610	300	0
63.0160	BEAUMONT HOSPITAL - TROY	Н	4	9	0	тсс	119	999	425	0
63.0176	HENRY FORD WEST BLOOMFIELD HOSPITAL	Н	2	Θ	0	EPCI	57	168	163	0
63.0177	ASCENSION PROVIDENCE HOSP- NOVI CAMPUS	Н	2	9	Θ	EPCI	88	255	233	Θ
74.0010	LAKE HURON MEDICAL CENTER	Н	1	Θ	0	DCC	0	0	0	0
74.0020	MCLAREN PORT HURON	Н	4	9	0	тсс	115	420	144	0
81.0030	TRINITY HEALTH ANN ARBOR HOSPITAL	Н	6	1	0	тсс	197	958	652	0
81.0060	UNIVERSITY OF MICHIGAN HEALTH	Н	11	1	3	тсс	83	643	881	58
82.0010	BEAUMONT HOSPITAL - WAYNE	Н	2	0	0	EPCI	55	196	56	0
82.0030	BEAUMONT HOSPITAL - GROSSE POINTE	Н	1	0	0	EPCI	29	146	0	0
82.0070	GARDEN CITY HOSPITAL	Н	2	0	Θ	EPCI	42	161	28	0
82.0120	BEAUMONT HOSPITAL - DEARBORN	Н	8	1	Θ	тсс	170	768	554	0
82.0170	BEAUMONT HOSPITAL - TRENTON	Н	2	Θ	Θ	EPCI	57	319	100	0
82.0190	TRINITY HEALTH LIVONIA HOSPITAL	Н	2	9	0	EPCI	114	211	162	0
82.0230	HENRY FORD WYANDOTTE HOSPITAL	Н	2	Θ	Θ	EPCI	52	656	428	0
83.0080	CHILDREN'S HOSPITAL OF MICHIGAN	Н	0	0	2	тсс	0	0	0	27
83.0190	HENRY FORD HEALTH HOSPITAL	Н	9	2	Θ	тсс	97	1,027	344	0

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Facility					# of Hybrid	# of Ded	Highest Level	Primary PCI	PCI	Adult CIED	Pediatric CIED
Number	Facility Name		Туре	# of Adult CCL	OR/CCL	Ped/Cong CCL**	Cardiac Cath*	Sessions	Sessions	Procedures	Procedures
83.0220	HARPER UNIVERSITY HOSPITAL		Н	6	9	0	TCC	87	505	0	0
83.0420	ASCENSION ST. JOHN HOSPITAL		Н	8	1	0	TCC	73	1,035	433	0
83.0450	SINAI-GRACE HOSPITAL		Н	3	0	0	тсс	38	161	114	Θ
HSA 1: S	OUTHEAST MICHIGAN	30 Facilities		116	9	5		2,239	13,620	7,349	85
33.0010	MCLAREN GREATER LANSING		Н	5	1	0	тсс	47	499	244	0
33.0060	EDWARD W SPARROW HOSPITAL		Н	6	1	0	тсс	138	549	586	Θ
38.0010	HENRY FORD HEALTH JACKSON H	HOSPITAL	Н	4	1	Θ	TCC	534	408	271	Θ
HSA 2: M	ID-SOUTHERN	3 Facilities		15	3	0		719	1,456	1,101	0
11.0050	050 LAKELAND HOSPITAL, ST. JOSEPH		Н	4	0	0	TCC	390	69	269	Θ
39.0010	010 ASCENSION BORGESS HOSPITAL		Н	6	0	0	тсс	191	1,084	467	Θ
39.0020	39.0020 BRONSON METHODIST HOSPITAL		Н	4	0	0	TCC	174	500	498	Θ
HSA 3: S	OUTHWEST	3 Facilities		14	0	0		755	1,653	1,234	0
41.0040	41.0040 SPECTRUM HEALTH - BUTTERWORTH CAMPUS		Н	12	3	1	тсс	285	1,176	1,315	19
41.0060	060 UNIVERSITY OF MICHIGAN HEALTH - WEST		Н	4	0	0	тсс	69	191	203	0
41.0080	80 TRINITY HEALTH GRAND RAPIDS HOSPITAL		Н	2	0	0	EPCI	42	237	178	Θ
61.0020	TRINITY HEALTH MUSKEGON HOSPITAL		Н	5	1	0	тсс	119	335	0	Θ
70.0020	HOLLAND COMMUNITY HOSPITAL		Н	1	0	Θ	EPCI	53	169	107	Θ
HSA 4: W	EST MICHIGAN	5 Facilities		24	4	1		568	2,108	1,803	19
25.0040	HURLEY MEDICAL CENTER		Н	2	0	0	EPCI	57	239	328	Θ
25.0050	MCLAREN FLINT		Н	8	1	0	TCC	124	800	716	Θ
25.0072	ASCENSION GENESYS HOSPITAL		Н	5	0	Θ	TCC	128	317	283	Θ
HSA 5: G	ENESEE-LAPEER-SHIAWASSEE	3 Facilities		15	1	0		309	1,356	1,327	Θ
09.0050	MCLAREN BAY REGION		Н	6	1	Θ	TCC	75	1,198	374	Θ
29.0010	MYMICHIGAN MEDICAL CENTER ALMA		Н	1	0	Θ	DCC	0	0	32	Θ
32.0020	MCLAREN THUMB REGION		Н	1	9	Θ	DCC	Θ	Θ	0	Θ
37.0010	MCLAREN - CENTRAL MICHIGAN		Н	1	9	Θ	DCC	Θ	Θ	0	Θ
56.0020	MYMICHIGAN MEDICAL CENTER N	1IDLAND	Н	4	1	Θ	TCC	169	636	635	Θ

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Facility					# of Hybrid	# of Ded	Highest Level	Primary PCI	PCI	Adult CIED	Pediatric CIED
Number	Facility Name		Туре	# of Adult CCL	OR/CCL	Ped/Cong CCL**	Cardiac Cath*	Sessions	Sessions	Procedures	Procedures
65.0010	MYMICHIGAN MEDICAL CENTER	WEST BRANCH	Н	1	0	Θ	DCC	Θ	Θ	9	0
73.0020	20 COVENANT MEDICAL CENTER - COOPER		Н	6	1	0	TCC	110	428	406	0
73.0050	0050 ASCENSION ST. MARY'S HOSPITAL		Н	5	0	Θ	TCC	67	277	456	0
HSA 6: E	AST CENTRAL	8 Facilities		25	3	0		421	2,539	1,903	0
04.0010	04.0010 MYMICHIGAN MEDICAL CENTER ALPENA		Н	1	0	0	DCC	0	0	0	0
24.0030	.0030 MCLAREN NORTHERN MICHIGAN HOSPITAL		Н	4	0	0	TCC	101	475	286	0
28.0010	28.0010 MUNSON MEDICAL CENTER		Н	8	2	Θ	TCC	477	400	0	0
HSA 7: N	HSA 7: NORTHERN LOWER 3 Facilities			13	2	0		578	875	286	0
52.0050 UP HEALTH SYSTEM-MARQUETTE		Н	4	0	0	TCC	295	137	227	0	
HSA 8: U	PPER PENINSULA	1 Facility		4	0	0		295	137	227	0
State To	State Total 56 Facilities			226	22	6	DCC: 6	5,884	23,744	15,230	104
							EPCI: 15				
							PPCI: 1				
							TCC: 34				

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